

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11910753	(X3) DATE SURVEY COMPLETED 09/16/2014
NAME OF PROVIDER OR SUPPLIER Windsor Place Retirement Home	STREET ADDRESS, CITY, STATE, ZIP CODE 1850 Ne 26th Street Wilton Manors, FL 33305	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0000 - - Initial Comments
 St - A - 0052 - 58a-5.0185(3) Fac - Medication - Assistance With Self-Admin S-S= D
 St - A - 0080 - 58a-5.0191(1) Fac - Training - Core & Competency Test S-S= D
 St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
 St - A - 0090 - 58a-5.0191(11) Fac - Training - S-S= D
 St - A - 0162 - 58a-5.024(3) Fac - Records - Resident S-S= D

Specific Tag Findings:

0000-Initial Comments

An unannounced Relicensure survey with Limited Mental Health services was conducted on _____ at Windsor Place Retirement Home. The facility had deficiencies found at the time of the visit.

0052-Medication - Assistance with Self-Admin 58A-5.0185(3) FAC

Based on observation and interview, the facility failed to follow the proper procedures for providing assistance with self-administration of medication, for 1 out of 3 residents (Resident #13) observed during medication pass.

The findings include:

Observations on _____ at 12 noon found Resident # 13 receiving the following medication: Pramipex 1 mg and _____ mg. Observations during assistance with self-administration of medication revealed Staff B, a Licensed Practical Nurse (LPN), assisted Resident # 13 with self-administration of medication. Staff B sanitized her hands, took the medication out of a locked medication cart, put Resident # 13's medications in her hand, and gave the medication along with a cup of water to the resident. Staff B stated the name of the medications to Resident # 13. Staff B observed Resident # 13 take her medications and signed her Medication Observation Record (MOR). Staff B left Resident # 13's bubble pack of medications on top of the medication cart along with the key left in the medication key lock, unsupervised, in an unlocked nurses' _____ the door open that was accessible to anyone walking by. (Photographic evidence obtained)

During an interview on _____ at 12:30 PM, Staff B was informed of the process for assisting residents with self-administration of medications. Staff B acknowledged her error in not putting Resident #13's medication back into the locked medication cart.

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In an interview with the Administrator on at 1:30 PM, he acknowledged the finding.

Class III

0080-Training - Core & Competency Test 58A-5.0191(1) FAC

Based on interview and record review, the Assisted Living Facility (ALF) Assistant Administrator failed to participate in CORE Training updates that includes 12 hours of continuing education in topics related to assisted living every 2 years as provided under section 429.52, F.S.

The findings include:

On, a record review of Assistant Administrator's file revealed she has been the Assistant Administrator of this facility since 1996 and her last ALF CORE training update was completed. Further review found no ALF CORE training's on file for 2014.

In an interview with the Administrator on at approximately 1 PM, he stated that the Assistant Administrator is also his designated ALF Manager. He stated he was unaware of the required 12 hours of continuing education that has to be completed every 2 years. He acknowledged that the Assistant Administrator will have to retake the ALF CORE training, as the continuing education requirements were not maintained as required.

Class III

0081-Training - Staff In-Service 58A-5.0191(2) FAC

Based on record review and interview, it was determined the facility failed to ensure that all staff members had completed the required in-service trainings within 30 days of hire, for 3 out of 3 sampled staff records reviewed (Staff A,B, and C).

The findings include:

Record review of the facility's personnel records revealed Staff A hire date; Staff B's hire

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date; _____ and Staff C's hire date; _____. Record review revealed Staff A, B, and C's files lacked documentation indicating the employees had completed the following in-service training: Incident Reporting.

Further Review of Staff B's personnel record revealed the employee lacked documentation indicating the employee had completed the following in-service trainings: Emergency Preparedness and Recognizing/Reporting _____ and Neglect _____.

In an interview with the Administrator on _____ at approximately 1:20 PM, he acknowledged the findings. He stated no further documentation was available for review.

Class III

0090-Training - _____ 58A-5.0191(11) FAC

Based on record review and interviews, the facility failed to ensure that 3 out of 3 sampled staff (Staff A, B, and C) had documentation of 1 hour of training on the facility's policy and procedures regarding _____.

The Findings Include:

A record review conducted on _____ revealed Staff A hire date _____, Staff B hire date _____ and Staff C's hire date _____. Further record review revealed Staff A, B, and C's file lacked documentation indicating completion of 1 hour of training in the facility's policy and procedures regarding _____ within 30 days of employment.

In an interview conducted on _____ at 1:30 PM, the Administrator acknowledged the findings.

Class III

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0162-Records - Resident 58A-5.024(3) FAC

Based on record review and interview, the assisted living facility failed ensure 1 out of 2 (Resident #4) sampled residents record reviewed who receive assistance with self-administration by unlicensed staff have a completed consent and a copy of the resident's contract with the facility that includes the contract date and rates.

The findings include:

On , a record review of Resident #4 revealed she was admitted to the facility on . The record review revealed Resident # 4 had a medication observation record which was being completed by unlicensed staff. Resident 4's record lacked documentation of an informed consent for unlicensed staff to assist with medications.

Further record review of Resident # 4's file found no residency contract date and rates with the facility. In an interview with the Administrator on , he stated the contract date and rates should be in the resident's file. After looking through Resident # 4's file, he stated he was unable to locate it.

In an interview with the administrator on at approximately 1:20 PM, he acknowledged the findings.

Class III



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

2014

Administrator
Windsor Place Retirement Home
1850 NE 26th Street
Wilton Manors, FL 33305

RE: Relicensure Survey

Dear Administrator:

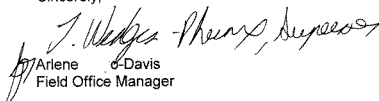
This letter reports the findings of a state licensure survey that was conducted on 2014 by representatives of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within **thirty (30) days** of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review after to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at <http://ahca.myflorida.com/Publications/Forms.shtml> as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the representatives. Should you have any questions please call this office at (561) 381-5840.

Sincerely,


Arlene Davis
Field Office Manager

AMD/dso
Enclosure: State form 5000-3547
XG90

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